

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature X <u>Richard P. Wasko</u> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to:		B. Received by (Printed Name) <u>Richard P. Wasko</u> C. Date of Delivery <u>6-19-08</u>	
2. Article Number (Transfer from service label)		D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:	
3. Article Addressed to:		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
District of Vermont P.O. Box 945 Burlington, VT 05402		<input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> C.O.D.	
7004 2510 0001 9746 9247 PS Form 3811, February 2004 Domestic Return Receipt		102595-02-M-1540	

FILED

JUN 24 2008 TC
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MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURT

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Northern District of Illinois
Clerk's Office
219 S. Dearborn
Chicago, IL 60604

RECEIVED

JUN 24 2008



MICHAEL W. DOBBINS
CLERK, U. S. DISTRICT COURT